

Town of Buena Vista  
Fixture Count Form for new meters

revised  
8/26/2010

**INSTRUCTIONS: Customer to complete the customer information and '# of fixtures' column.**

Public Works will determine meter size before tap application is requested

Customer _____	Address _____
Building address _____	ADU (Guest House) Yes    No
Subdivision _____	Lot # _____ Block _____
Type of occupancy (circle one)	<u>commercial/ residential / multi family / other</u>
Date _____	

Fixture type	Value 60 psi		# of Fixtures		Fixture Value
Bathtub	8	x		=	
Bidet	2	x		=	
Dental Unit	2	x		=	
Drinking fountain	2	x		=	
Kitchen sink:	2.2	x		=	
Lavatory:	1.5	x		=	
Shower	2.5	x		=	
Service Sink:	4	x		=	
Toilet					
Flush Valve	35	x		=	
Tank Type	4	x		=	
Urinal:					
Pedestal flush	35	x		=	
Wall flush	16	x		=	
Wash sink (/faucet)	4	x		=	
Dishwasher:	2	x		=	
Utility Sink	4	x		=	
Washing machine:	6	x		=	
Hose connection:					
1/2" connection	5	x		=	
5/8" connection	9	x		=	
3/4" connection	12	x		=	
				Total	

Irrigation: (per 100 sf)					
spray	1.16	x	(sf)	=	
rotary	0.4	x	(sf)	=	
				Total	

**For Staff Use:**

Total Demand _____	
Meter size _____	
PW Signature _____	Date _____

**Town of Buena Vista  
Water Tap Application**

Permit # \_\_\_\_\_

Owner (s) Name :

Physical Address:

Mailing Address:

Applicant if not owner:

Mailing Address:

The Owner of the property hereby applies for a water tap for the property identified by the physical address listed above. Owner certifies that the water tap is to serve the structure to be built in accordance with the attached building permit application #\_\_\_\_\_. The Owner has given permission for the applicant to apply for the water tap on the owner's behalf. Owner requests that the water bill be sent to:  
(check one) \_\_\_\_\_ Owner \_\_\_\_\_ applicant \_\_\_\_\_ until the Owner notifies the Town otherwise. Owner understands that the Owner is ultimately responsible for all unpaid water bills, which are considered a lien on the property in accordance with Colorado law.

Owner's Signature

Applicant signature, if not owner

Application Date: \_\_\_\_\_

**PERMIT TO TAP WATER MAIN**

System Improvement Fee: \_\_\_\_\_ Check Number: \_\_\_\_\_

Tap permit #: \_\_\_\_\_ Quadrant: \_\_\_\_\_

Tap Location: \_\_\_\_\_ Tap Size: \_\_\_\_\_

Water Service Size: \_\_\_\_\_ Service Length: \_\_\_\_\_

Meter: Type \_\_\_\_\_ Size: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Meter Cost: \_\_\_\_\_ Check #/Date: \_\_\_\_\_

Inspected By: \_\_\_\_\_ Tapping Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_